Entered - 04/11/01 - sb CL01L0229 - DIANNE C. MITCHELL

CLAIM OF: ATLANTA CASUALTIES COMPANIES,

through its agent,

NCO Financial Systems, Inc.

P. O. Box 28100

Atlanta, Georgia 30358

01- ρ -0805

For damages alleged to have been sustained as a result of damages due to an unspecified incident on an unspecified date and location.

THIS ADVERSED REPORT IS APPROVED

ubers Love OQ **DEPUTY CITY ATTORNEY**

DEPARTMENT OF LAW - CLAIM INVESTIGATION SUMMARY

Claim No. 01L0229	Date: <u>May 16, 2001</u>
COLUMN TO THE CASE OF	COMPANYO
Claimant / Victim ATLANTA CASUALTIES	COMPANIES
BY: (Atty)(Ins. Co.) NCO Financial Systems, Inc.	orgia 30358
Address: P. O. Box 28100, Atlanta, Ge	135.00 Bodily Injury \$
Subrogation: X Claim for Property damage \$	Bodily Injury \$
Date of Notice: 04/10/01 Method: W	ritten, proper Improper Ante Litem (6 Mo.)
Conforms to Notice: O.C.G.A. §36-33-5	Ante Litem (6 Mo.)
Date of Occurrence Not Stated Pla	ce: Not Stated
Department Fire	Division:Disciplinary Action:
Employee involved	Disciplinary Action:
	to collect damages for an unspecified incident. The claim as nts as set forth in O.C.G.A. §36-33-5.
INVESTIGATION:	
Statements: City employee Claimant	Others Oral
Pictures Diagrams Reports: Police	ce Dept Report Other
	Claimant Driver
Citation disposition: City Driver	Claimant Driver
1 3	
BASIS OF RECOMMENDATION:	
Function: Governmental X	Ministerial
Improper Notice X More than Six Months	Other Damages reasonable
City not involved Offer reje	cted Compromise settlement
Repair/replacement by Ins. Co.	Repair/replacement by City Forces
Claimant Negligent City Negligent	Repair/replacement by City Forces
	Respectfully submitted,
•	MVESTIGATOR - DIANNE C. MITCHELL
	INVESTIGATOR DIAMME C. WITCHELL
RECOMMENDATION:	
Paul C	Account charged: 1 A O1 2101 21101
Pay \$ Adverse X	Account charged: 1A01 2J01 2H01 2H01
Claims Manager:	Concur/date 5516-01
Committee Action:	Council Action
FORM 23-61	

P.O.,BOX 28100 ATLANTA, GA 30358 1-219387

NC FINANCIAL SYSTEMS INC

1-800-444-1107

OFFICE HOURS:

8AM-9PM MON THRU THURSDAY

8AM-5PM FRIDAY 8AM-12PM SATURDAY

March 15, 2001

219387

FIRE DEPT DO CITY OF ATLANTA

FS MITCHEL ST

ATLANTA GEORGIA

Personal & Confidential

ENTERED 4-11-01 - SB

01L0229 - DIANNE MITCHELL

Principal:

135.00

Interest: Fees: 0.00

Total:

0.00 135.00

RE: ATLANTA CASUALTY COMPANIES - 0657568402 219387

The total on the above account is due in full. Your cooperation in settling the account is solicited. Unless you notify this office within thirty (30) days after receiving this notice that you dispute the validty of the debt, or any portion thereof, we will assume the debt to be valid. If you notify us in writing within thirty days from the date you receive this notice that the debt, or any portion thereof, is disputed, we will obtain verification of the debt or a copy of a judgement and mail it to you. In the event that the name of the creditor is different from the original creditor and you, within the thirty (30) day period, in writing, request the name and address of the original creditor, we will supply this information to you.

If the payment has been made, please disregard this notice.

This is an attempt to collect a debt. Any information obtained will be used for that purpose. This is a communication from a debt collector.

PLEASE RETURN THIS PORTION WITH YOUR PAYMENT (MAKE SURE ADDRESS SHOWS THROUGH WINDOW)

ATLANTA CASUALTY COMPANIES RHONDA MCALISTER ALPHARETTA, GA 30022

01-R -0805

Check here if your address has changed and print your new address in the space provided below.

Account # Due Date Total Balance
219387 \$ 135.00

FIRE DEPT 10 CITY OF ATLANTA

Payment Amount

1

\$

Make Payment To: